MONTANA LEGISLATIVE HISTORY

Chapter 325 1967

Bill H _____ S 4 Original bill & history ___C

H. Committee on Public Health

Hearing Date(s) 2/23 ✓ C

_____ ___C

_____ ___C

_____ ___C

Date Out _____ ___C

S. Committee on Public Health

Hearing Date(s) 1/20 ✓ C

1/30 ✓ C

_____ ___C

_____ ___C

Did this bill originate in an interim committee? ___Yes ___No

Committee _____ Report _____

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SENATE COMMITTEE ON

Public Health, Welfare and Safety

NAME	DATE
Chairman Flynn, Elmer	
Vice-Chairman Shugrue, S. J.	
Cotton, R. S.	
Judge, T. L.	
Rasmussen, Dr. R. J.	
Thiessen, C. R.	
Bennett, W. F.	
Deschamps, G. W.	
Hibbard, H. S.	
Hilling, H. B.	
Swanz, E. A.	

COMMITTEE ON PUBLIC HEALTH, WELFARE AND SAFETY

BILL NO.	ENTERED COMM.	OUT OF COMM.	DO PASS	DO NOT PASS	DO PASS AS AMENDED	BE CONCURRED IN	BE NOT CONCURRED IN
10	1/9/67	1/13/67			X		
14	1/13/67	1/13/67	X				
SJR 1	1/13/67	1/13/67	X				
24	1/16/67	1/16/67			X		
32	1/20/67	1/20/67	X				
48	1/20/67	1/20/67	X				
65	1/20/67	1/20/67	X				
4	1/20/67	1/30/67			X		
70	1/23/67	1/23/67	X				
97	1/25/67	1/27/67		X			
242	1/25/67	1/25/67	X				
235	1/25/67	1/30/67			X		
SJR 17	1/25/67	1/25/67	X				
SJR 4	died in committee						
169	1/27/67	1/27/67	X				
220	2/1/67	1/6/67			X		
182	2/1/67	2/3/67	X				
187	2/1/67	2/1/67	X				

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MINUTES
PUBLIC HEALTH, WELFARE AND SAFETY COMMITTEE
STATE SENATE

January 20, 1967

The meeting of the Public Health, Welfare and Safety Committee was held in room 442, on adjournment, January 20, 1967. The meeting was called to order by the chairman and roll call was taken. All were present.

SENATE BILL 48 introduced by Senator Jack Rehberg was first acted upon. He said the purpose of the bill was to change the definition of the word "ice cream factory". He said the definition was not realistic. Also stated that a place that sells food and meals is not to be considered as an ice cream parlor.

SENATE BILL 65. introduced by Senator Jack McDonald was the second bill acted upon by the committee. He told of a lady who wants to take in 50 patients from Boulder into her home and train and educate these children. He also said that the children that would be sent to this lady, would be ones that could take care of themselves.

SENATE BILL 32 was then acted upon. Executive Secretary from Montana State Pharmacitical Association, Roderic R. Gudgel, was a proponent. He defined the word "cost" and said that no person was to go out of business or lower their cost for the purpose of injuring or damaging their competitors.

SENATE BILL 4 introduced by Senator Tom Judge was then acted upon. He said it was an act that will allow Montana to be situated under title 19. Eventually this money will serve more people then medicare. There are four phases to this bill and in July, 1967, there should be five. He also introduced Mr. Ed Shoebat, County Commissioner from Great Falls, Montana, who also talked on the bill. Gave some important facts about how much money is used annually for this purpose. Another speaker was Mr. Francis Mitchell, Great Falls, Montana, who gave the amendments from the house bill and the amendments for Senate Bill 4.

The bills were then acted upon. Senate Bill 48, was motioned to do pass by Senator Hilling and seconded by Senator Thiessen.

Senate Bill 65 was motioned to do pass by Senator Rasmussen and being seconded by Senator Shugrue.

Senate Bill 32 was motioned to do pass by Senator Deschamps being seconded by Senator Shugrue.

Senate Bill 4 was motion to be deferred until a later date by Senator Rasmussen and seconded by Senator Shugrue.

The meeting was then motioned and seconded to adjourn.

Elmer Flynn

SENATOR ELMER FLYNN, CHAIRMAN

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MINUTES
PUBLIC HEALTH, WELFARE AND SAFETY COMMITTEE
STATE SENATE

January 30, 1967

The meeting of the Public Health, Welfare and Safety Committee was held in room 440, January 30, 1967, on adjournment. The meeting was called to order by the Chairman and roll call was taken. All were present.

SENATE BILL 4 which was previous introduced by Senator Judge was again given to the committee for their consideration. Proponents for the bill were Mr. John Coy, Mr. Ed Shoebat, who read a letter from Salt Lake Commissions Association stating that they approved of Senate Bill 4. They are satisfied with the tow programs ADC and title 19. Senate Bill 4 takes care of those who are medically injured. It keeps the people off the welfare rolls. Countries and States would save money with Senate Bill 4.

Bill Leary, Secretary from Montana Hospital Association and Mr. Carculas read some amendments for the bill. Also the cost to put this bill into effect. The first phase of the bill must be in effect by 1970. Along with the amendments of the House Bill 4, Senate Bill 4 was amended by the committee.

Senator Judge then motioned to adopt the amendments of the bill being seconded by Senator Deschamps. The motion was moved and carried. Senator Shugrue then motioned that Senate Bill 4 do pass as amended being seconded by Senator Hibbard. The motion was moved and carried.

HOUSE BILL 183 which delt with hotels and motels was then given to the committee for their consideration. This bill provides for the establishment of transient lodging space for accomodations. They want to charge a license fee from $2 to $5 to establish poor conditions and up date the existing laws. Proponents were Clayborn Brinck and Vern Solan. The bill was then moved and seconded to be concurred in by Senator Hilling and Senator Hibbard.

SENATE BILL 235 introduced by Senator Gilfeather was again present to the committee. The bill dealt with the cost of leaving adjustments to standards of Welfare Assistance. Senator Gilfeather presented an amendment and Senator Hilling added to the amendment. The bill was then motioned to do pass as amended by Senator Hilling and seconded by Senator Deschamps. The motion was moved and carried.

HOUSE BILL 13 was then given consideration by the committee. This bill dealth with the assistance payments of another person who is found interest in the welfare of such old aid assistance. The bill was put in a subcommittee at the previous meeting to be further discussed. Senator Rasmussen

Public Health, Welfare & Safety COMMITTEE

40th Legislative Assembly

Bill No.	Subject Matter	Date In	Hearing Date	Comments	Date Out	Committee Action	Final Action
499 -- Cox	Classify Air Pollution Equipment as Class 7 for Taxation	2/3					
SB 24 -- Rehrberg, Bertsche	To Conserve and Protect the Water Resources of the State	1/28	2/9 2/10 2/14		2/15	Concurred In, As Amended	
SB 205 -- Tracy, Shugrue	Relating to Payments to Silicotics	2/4	2/16		2/17	Concurred In	
SB 235 -- Gilfeather	Provide Cost of Living Adjustments to Standards of Welfare Assistance	2/4	2/16		2/17	Concurred In	
SB 4 -- Judge	Provide for Medical Assistance in Conformity with Federal Social Security Act of 1935.	2/9	2/23		2/24	Concurred In, As Amended	
SB 48 -- Rehberg	Definition of Ice Cream Factory Does Not Include Establishments Whose Business is Serving Meals to the Public	2/9	2/14 2/16		2/17	Be Not Concurred In	
House Joint Res. No. 8	Urging All Peace Officers to Enforce Law Against Selling Cigarettes to Minors under 18	2/11	2/16		2/17	Do Pass, As Amended	

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February 23, 1967

PUBLIC HEALTH, WELFARE & SAFETY COMMITTEE MINUTES

The Public Health, Welfare & Safety Committee met in Room 119 at 6:00 p.m., Thursday, February 23, 1967, to consider Senate Bill 4 and Senate Joint Resolution No. 1. All members were present with the exception of Delano, Marbut, Patrick, Fischer and Lee. Mr. Crum presided.

Senator Thomas L. Judge, principal sponsor of Senate Bill 4, explained the bill section by section, pointing out that the bill would implement phases 1 through 3 under Title XIX of the Federal social security act. In order to not lose federal funds, the first phase must be implemented by 1969, and the other three phases by 1975. SB 4 gives first priority to phase 1, and as the Welfare Department sees fit and has funds available, it would enable them to go into the next two phases. He also stated that it would be about the biggest property tax relief measure in that 64% of the cost would be borne by the federal government, with 20.4% by the state and 15.6% by the counties.

Senator Robert J. Rasmussen appeared on behalf of the Montana Chiropractic Association, presenting four suggested amendments (attached). Mr. Rod Gudgel, Executive Secretary of the Montana State Pharmaceutical Association, commented that he had been serving as an alternate on the Association's Advisory Council, and they hoped and asked that the committee give a "Do Pass" recommendation to this type of legislation. He also recommended that if any modifications are made to the bill, that the language allowing freedom of choice of the recipient to select the vendor or provider of medical care services or prescribed drugs be retained.

Mr. Ed Shobat, Cascade County Commissioner, pointed out they have 3300 people on welfare, and anticipate more, and are looking for some relief, and feel SB 4 is good legislation, recommending that the implementing of phase 2 and 3 be retained. Mr. Dan Mizner, president of the Montana Association of County Commissioners, said that his association endorsed SB 4, and support this type of legislation. He said his only concern is that enough money be appropriated so that Welfare can support their end of the program so that it can be implemented.

Mr. Chadwick H. Smith, appearing on behalf of the American Mutual Insurance Alliance, offered an amendment to Section 6, subsection (5), for the committee's consideration (attached).

Mr. W. J. Fouse, administrator of the State Welfare Department, said that the board has taken no position against Senate Bill 4, but that they did feel it might be advantageous to implement only phase 1 at this time, and perhaps in a couple of years the legislature would want to implement the other phases. The estimated additional cost of implementing the second and third phase is $1,495,062 of state funds. He felt the question would be raised as to why put these other two phases in if an appropriation isn't made to implement them, and this might prove to be confusing to people who would be qualified for aid, but with no money appropriated to pay the bill.

Mr. Ted Carkulis, Director of Statistics and Research of the Welfare Department, presented and discussed amendments they felt were necessary to the bill covering children in foster homes under state supervision and to meet technical federal requirements concerning children under 21 (attached).

Mr. Tom Messelt of Great Falls, representing the Christian Science Association, read a prepared statement and presented an amendment for consideration of the committee (attached).

After a question period, witnesses were excused.

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Mr. Hall moved that the amendment suggested by the Christian Science Association not be approved by the committee. Motion carried.

Mr. Hall moved that the bill be amended in Section 2, subsection (h), lines 23 and 24, page 3 of the printed bill as follows: after the word and punctuation "preventive," strike the word "and", and after the word "rehabilitative" insert the following punctuation and words: ", chiropractic and osteopathic". Motion was carried. Mr. Hall also moved that the other suggested amendments enlarging the advisory council to include a chiropractor and osteopath not be concurred in by the committee. Motion passed.

Mr. Prevost moved that the amendment suggested by Mr. Smith to Section 6, subsection (5), not be adopted. Motion carried.

Mr. Hall moved that the bill be further amended as follows:

"Section 6; following line 21, page 6 of the printed bill -- add two new subsections, to be numbered (5) and (6), to read as follows:

'(5) all children under twenty-one who meet the conditions of eligibility in the State's plan for Aid to Dependent Children, other than with respect to school attendance.

'(6) all children under twenty-one who are in foster care under the supervision of the state department (except children in public institutions).'

"Further amend by renumbering subsection (5) and (6) to read subsection (7) and (8), respectively.

"Section 7; line 7, page 6 of the printed bill -- strike the punctuation and figure '(4)' and insert in lieu thereof the figure and punctuation '(6)'.

"Section 7; line 11, page 6 of the printed bill, which is line 2, page 7 of the original bill -- strike the figures and punctuation '(5)' and '(6)' and insert in lieu thereof the figures and punctuation '(7)' and '(8)', respectively.

"Section 7; line 15, page 7 of the printed bill -- strike the figures and punctuation '(5)' and '(6)' and insert in lieu thereof the figures and punctuation '(7)' and '(8)', respectively."

Mr. Himsl moved for adoption of the amendment. Motion carried.

Mr. Hall moved that the following amendment be made: Section 9, line 3, page 7 of the printed bill -- strike the word "provider". Motion carried.

Mr. Hall then moved that Senate Bill 4 "Do Pass, As Amended".

Mr. Ainsworth made a substitute motion that Section 6, subsections (5) and (6), lines 22 through 34, page 6 of the printed bill be deleted from SB 4, and that Section 7 be amended beginning on line 3, page 6 of the printed bill by changing the ";" after the word "department" to a "." and striking the rest of the section completely. The substitute motion failed, with the main motion of "Do Pass, As Amended" then passing.

Senate Joint Resolution No. 1: Mr. Healy moved that SJR No. 1 "Do Pass". Motion carried.

Meeting adjourned at 7:20 p.m.

Forrest H. Crum

FORREST H. CRUM, Committee Chairman

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SENATE COMMITTEE OF THE WHOLE AMENDMENT

EXAMPLE

I move to amend Section ....., Sub.Section ....., page ....., line ..... of the original bill, being Section ....., page ....., line ..... of the printed bill, by (deleting or striking) the following (words, figures, punctuation, underlining) "....." and inserting in lieu thereof the following (words, figures, punctuation, underlining ".....".

MR. CHAIRMAN: I MOVE TO AMEND SECTION

2. 2, page 3, line 5 of the Public Health, Welfare and Safety committees amendment of January 30 of the original bill No. 4 after the word "than" by omitting the word "nine" and inserting in lieu thereof the word "eleven"

3. and further amend the Public Health, Welfare and Safety committees amendment of January 30, being Section 2, page 3, line 13 of the amendment attached to the original bill No. 4 after the word "Association" by inserting the following words, numbers and punctuation "; (9) Montana Chiropractic Association; (10) Montana Osteopathic Association"

4. And further amend the Public Health, Welfare and Safety committees amendment of January 30, being Section 2, page 3 line 18 of the amendment attached to the original bill No. 4 after the word "The" by omitting the word "ninth" and inserting in lieu thereof the word "eleventh"

1. And further amend Section 2, subsection h, page 3, line 4 of the original bill, being Section 2, page 3, line 24 of the printed bill by omitting the punctuation "semi-colon" after the word "services" and inserting the following words and punctuation "including but not limited to Chiropractic and Oesteopathic services as prescribed;"

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(Submitted by Mr. Chadwick Smith, representing American Mutual Insurance Alliance)

SENATE BILL NO. 4

MR. CHAIRMAN:

I move to amend Section 6 of Senate Bill No. 4 by adding after line 19 of page 6 of the original bill, being line 34 of Section 6 of the printed bill, the following words:

> "Provided that no payment shall be made under this act for medical assistance for an injury, disease or disability to any person who is entitled to payment for such injury, disease or disability under the workmen's compensation act of any state, and provided, further, that after any payment under this act, the state department shall be subrogated to the extent of such payment to any claim which such person has against any third party for such injury, disease or disability."

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Suggested by State Welfare Department

Insert between Lines 21 and 22 of Page 6 of the printed bill

(5) all children under twenty-one who meet the conditions of eligibility in the State's plan for Aid to Dependent Children, other than with respect to school attendance.

(6) all children under twenty-one who are in foster care under the supervision of the state department (except children in public institutions).

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STATEMENT
ON
SENATE BILL NO. 4

My name is Tom Messelt and I represent the Christian Science movement in Montana. It is a religious denomination whose Tenets and practices include reliance upon prayer or spiritual means for treatment of illness or injury.

Christian Science healing is recognized by Congress, by the Secretary of Defense, the Secretary of Health, Education and Welfare and by past Montana legislatures.

When Congress passed the Medicare law in 1965 (PL89-97), they recognized Christian Science sanitoriums as the equivalent of both medical hospitals and medical extended care facilities. The Department of Health, Education and Welfare will pay for hospitalization at a Christian Science sanitorium while an individual is receiving treatment from an accredited Christian Science practitioner just as they will pay for hospitalization at a medical hospital when a physician is on the case. However the practitioners charges are not allowable because of the possible involvement of church and state.

In the case of PL89-614, which provides for care of dependents of active duty members of the uniformed forces it uses this wording:

> "Under joint regulations to be prescribed by the Secretary of Defense and the Secretary of Health, Education and Welfare, the services of Christian Science practitioners and nurses and services obtained in Christian Science sanitoriums may be provided."

The reason that these practitioners charges are allowable in this instance is that under this law, all payments for services, both

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medical and Christian Science are made through policies written by the Aetna Insurance Company.

We do not as yet have Christian Science sanitoriums or nurses in Montana and for the present we arrange as best we can for non-medical care in hospitals. We do not object to a doctor's examination of those who come to hospitals for care if it is required. All we ask is to be free from medical compulsion and to be permitted to seek the healing methods of our choice.

Senate Bill 4 does not follow the Medicare act in all particulars and we ask for a change that will make it conform to our satisfaction. We ask that under Section 2 (i) on page 3 of the bill, you add the following after the word "act", "and any other type of remedial care recognized under state law."

We will greatly appreciate the addition of this to the bill.

SENATE BILL NO. 4 (Printed Bill)

Amend Section 2(i) page 3, line 26 after the word "act" instead of a period a comma, and add "and any other type of remedial care recognized under state law."

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State of Montana
DEPARTMENT OF PUBLIC WELFARE

Estimates of Expenditures for the Provision of Medical Care under Various Legislative Proposals, for the Biennium 1967-1969

	Total Expenditures	State Funds
A. Payments to Vendors		
1. Kerr-Mills.....	$ 7,000,000	$1,400,000
2. House bill 4.....	13,986,000	2,859,324
3. Senate bill 4: As introduced.....	20,520,000	4,186,080
4. Including medically needy persons (Section 5(4) but not 5(8)).....	18,972,000	3,814,560
5. Including needy children (Section 5(8) but not 5(4)..	15,534,000	3,230,844
B. Administrative Costs		
1. Kerr-Mills.....	included in budget	
2. House bill 4.....	$397,850	$160,176
3. Senate bill 4.....	711,320	228,482

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SENATE BILL NO. 4

INTRODUCED BY JUDGE, HIBBARD, TURNAGE, GILFEATHER, HAFFERMAN, AND MITCHELL

71-1501 through 71-1510, 71-211

A BILL FOR AN ACT ENTITLED: "AN ACT TO PROVIDE FOR MEDICAL ASSISTANCE IN CONFORMITY WITH TITLE XIX OF THE FEDERAL SOCIAL SECURITY ACT OF 1935 AS AMENDED; PROVIDING FOR THE ADMINISTRATION OF THE ACT BY THE STATE DEPARTMENT OF PUBLIC WELFARE AND THE COUNTY DEPARTMENTS OF PUBLIC WELFARE; PROVIDING ELIGIBILITY REQUIREMENTS FOR ASSISTANCE UNDER THE ACT; AND PROVIDING FOR COUNTIES' SHARE OF PARTICIPATION UNDER THE ACT; AMENDING SECTION 71-211, R.C.M. 1947 TO CONFORM HEREWITH; AND REPEALING SECTIONS 71-1501 THROUGH 71-1510, R.C.M. 1947."

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF THE STATE OF MONTANA:

Section 1. Provisions for administration. (1) The state department of public welfare (hereinafter called "state department") is hereby authorized and empowered to administer and supervise a vendor payment program of medical assistance, under the powers, duties, and functions provided in Sections 71-201 through 71-232, R.C.M. 1947, as amended and as contemplated by the provisions of Title XIX of the Federal social secuirty act.

(2) The county department of public welfare shall be charged with the local administration and supervision of medical assistance, subject to the powers, duties and functions prescribed for the county department in sections 71-201 through 71-232, R.C.M. 1947.

(3) It is hereby mandatory and required that the state plan and operation of medical assistance shall be in effect in each and every county of the state and the administration and supervision of medical assistance shall be uniform throughout the several counties of the state.

(4) The state department of public welfare shall have printed and distribute copies of this act to all county welfare departments and shall prescribe the form of and print and supply to the county welfare departments blanks of applications, reports and such other forms as may be necessary in relation to medical assistance.

(5) All rules and regulations of the state department of public welfare made under this act shall be binding upon the county departments of public welfare.

(6) The state department shall adopt appropriate rules and regulations, not inconsistent with this act, to administer and supervise the said program uniformly throughout the state and shall define by rules and regulations medical assistance. Medical assistance shall be furnished through payments to providers of services and supplies as contemplated in this act. The definition of medical assistance shall include:

(a) Inpatient hospital services (other than services in a public institution for tuberculosis or mental diseases);

(b) Outpatient hospital services;

(c) Other laboratory and X-ray services;

(d) Skilled nursing home services (other than services in a public institution for tuberculosis or mental diseases);

(e) Physicians' services, whether furnished in the office, the patient's home, a hospital, a skilled nursing home or elsewhere.

It may also include, although not necessarily limited to the following:

(a) Medical care, or any other type of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice as defined by State law;

(b) Home health care services;

(c) Private duty nursing services;

(d) Dental services;

(e) Physical therapy and other related services;

(f) Clinic services;

(g) Prescribed drugs, dentures, and prosthetic devices; and eyeglasses prescribed by a physician skilled in diseases of the eye or by an optometrist, whichever the individual may select;

(h) Other diagnostic, screening, preventive, and rehabilitative services;

(i) Any additional medical service or aid allowable under or provided by the federal social security act.

The foregoing services shall be provided to the fullest extent that moneys appropriated, collected, accumulated or matched from any source by the state department will allow. Priorities of the foregoing items and amounts of medical assistance, if funds are inadequate, shall be determined by the state department. The state department shall establish standards of assistance.

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Section 2. The state department shall advise with and consult at least semi-annually with a council composed of duly qualified members of the following organizations: From the Montana medical association, one (1) physician; the Montana state dental association; the Montana hospital association; the Montana state pharmaceutical association; the Montana nursing home association; the Montana association of county commissioners; the Montana nurses association; the Montana optometry association; the executive director of the state board of health, ex-officio; the administrator of public welfare, ex-officio, to serve as chairman; and one member at large to be appointed by the Governor. Each such organization shall select a member of its organization, as above designated, to serve on the council and one (1) alternate to serve in the absence of the principal. The member at large shall be appointed by the Governor for a term of three (3) years. Members shall be reimbursed for travel and actual expenses while in performance of their duties not to exceed that allowed to non-elective state officials.

Section 3. The state department shall provide for professional freedom of those licensed practitioners who provide medical assistance under this act, and provide reasonable freedom of choice to recipients of medical aid to select the vendor or provider of medical care or services; provided that in those counties where county hospitals, supported by county funds, provide adequate equipment, and facilities for the inpatients' and outpatients' needs of any recipient, and are certified for participation under Title XVIII of the Federal social security act, the county board of public welfare, with the approval of the state department, may require that the recipients be treated or cared for at such county hospital, if suitable vacancies exist in such county hospital, except that when emergency conditions exist any licensed hospital may be used to provide services.

Section 4. The state department may, by suitable rules and regulations, provide for contracting with any state or private agency for processing and payment of claims under such program of medical assistance, and the state welfare board shall have the authority to contract with one or more private or state agencies to provide any or all of the enumerated medical services.

Section 5. Eligibility requirements for medical assistance. Medical assistance shall be granted in behalf of:

(1) all persons who reside in the state of Montana, including residents temporarily absent from the state, and who receive all or part of their income from the federally aided public assistance programs: old-age assistance, aid to the blind, aid to dependent children, and aid to the permanently and totally disabled;

(2) All persons, who upon application, would be eligible for financial assistance under any one of the federally aided programs referred to above;

(3) All persons who would be entitled to financial assistance under one of the federally aided categories except that they do not meet the durational residence requirements or relative responsibility requirements of any of the public assistance programs above enumerated;

(4) All persons who would be entitled to financial assistance under one of the federally aided categories except for having enough income to meet their daily needs as defined by the state welfare department;

(5) Persons in medical institutions (except public institutions for tuberculosis or mental illness) who, if they were no longer in such institution, would be eligible for financial assistance under one of the above programs;

(6) All children under twenty-one who meet the conditions of eligibility in the state's plan for aid to dependent children, other than with respect to school attendance;

(7) All children under twenty-one years of age who are in foster care under the supervision of the state department (except children in public institutions);

(8) All medically needy children under twenty-one years of age as defined by the state welfare department.

Section 6. Amount of assistance. The amount of medical assistance granted in behalf of any person shall be determined by a county department of public welfare according to the rules and regulations and standards of assistance established by the state department.

Section 7. Application for assistance. Application for assistance under this part shall be made to the county office of the county department in the county in which the person is residing. The application shall be presented in the manner on the form prescribed by the state department. All individuals wishing to apply shall have the opportunity to do so.

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Section 8. County share of participation. Each county department shall reimburse the state department in the amount of one-half (1/2) of the approved provider medical payments paid by the state department in behalf of persons in the county each month, exclusive of the federal share. Such reimbursements shall be credited to the medical assistance account of the state department.

Section 9. Investigation and determination of eligibility. The county department shall promptly investigate and determine the eligibility of each applicant under this act in accordance with the rules and regulations of the state department. Each applicant shall be informed of his right to a fair hearing and of the confidential nature of the information given. The county department shall determine whether or not the applicant is eligible for assistance under this act, and aid shall be furnished promptly to eligible persons. The county public welfare board shall review the determination of the eligibility or non-eligibility made by the county department. Each applicant shall receive written notice of the decision concerning his application and right of appeal shall be secured to the applicant under the procedures of section 71-223, R.C.M. 1947.

Section 10. Redetermination of eligibility. All medical assistance cases approved under this part shall be reviewed as often as shall be required under the rules and regulations of the state department.

Section 11. Change of residence of person receiving medical assistance. A recipient who moves his residence to another county in this state shall continue to receive assistance under the rules and regulations of the state department. The county from which he has moved shall be charged by the state department for such county share of his assistance for a period of one (1) year after which time the county to which he has moved shall be charged therefor. The state department will determine the date of transfer. The county from which a recipient moves shall notify the state department and the county to which the recipient moves.

Section 12. Confidential records. All applications, information and records concerning any applicant or recipient of medical assistance under the provisions of this act shall be confidential and shall not be disclosed nor used for any purpose not directly connected with the administration of medical assistance. The violation of this provision is hereby made a misdemeanor and is punishable as such.

Section 13. Exclusion of lien. No applicant hereunder shall be required to execute an agreement for lien on his real property. No lien may be imposed against the property of any individual prior to his death on account of medical assistance paid or to be paid on his behalf (except pursuant to the judgment of a court on account of benefits incorrectly paid on behalf of such individual). There shall be no adjustment or recovery (except, in the case of an individual who was 65 years of age or older when he received such assistance, from his estate, and then only after the death of his surviving spouse, if any, and only at a time when he has no surviving child who is under age twenty-one (21) or is blind or permanently and totally disabled) of any medical assistance correctly paid on behalf of such individual. Recoveries shall be prorated to the federal government and the county involved in the proportion to which each contributed to the medical assistance.

Section 14. Relative's responsibility. The provisions of other parts of Title 71, R.C.M. 1947 as amended, notwithstanding, the only relatives that can be held responsible for payment of medical assistance under the program are the husband or wife of the individual, the parents of children under age twenty-one (21), and the parents of blind or disabled persons over age twenty-one (21).

Section 15. Discrimination prohibited. No discrimination shall be practiced or asserted against any applicant for or recipient of care and services under this act, on the basis of race, color, or national origin; and the furnishing of care and services under this act to any applicant or recipient thereof shall not be delayed or denied on the basis of race, color, or national origin.

Section 16. Section 71-211, R.C.M. 1947, is amended to read as follows:

"71-211. Board to act as agency of federal government--assistance to ward Indians. ~~The state department shall~~ act as the agent of the federal government in public welfare matters of mutual concern in conformity with this act and the Federal Social Security Act, and in the administration of any federal funds granted to the state to aid in the purposes and functions of the state department.

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The counties shall not be required to reimburse the state department any portion of old age assistance, medical assistance ~~for the aged~~, aid to needy dependent children or aid to needy blind or aid to the totally disabled paid to ward Indians, further provided that the Federal government may reimburse the state of Montana in behalf of counties, providing general relief to ward Indians, a sum in lieu of taxes which the counties would collect if the lands of such ward Indians were not in trust status. A ward Indian is hereby defined as an Indian who is living on an Indian reservation set aside for tribal use, or is a member of a tribe or nation accorded certain rights and privileges by treaty or by federal statutes. If and when the Federal Social Security Act is amended to define a "ward Indian," such definition shall supersede the foregoing definition."

Section 17. All acts and parts of acts in conflict herewith are hereby repealed.

Section 18. Legislative intent. It is the intent of the Legislative Assembly that if a part of this act is invalid, all valid parts that are severable from the invalid part remain in effect. If part of this act is invalid in one or more of its applications the part remains in effect in all valid applications that are severable from the invalid applications.

Section 19. Sections 71-1501 through 71-1510, R.C.M. 1947, are repealed.

Severability clause.

Section 9. If any sentence, section, clause, or phrase of this act is for any reason held to be unconstitutional or invalid, such decision shall not affect the validity of the remaining portions of this act. The legislative assembly of the state of Montana hereby declares that any one or more sections, sentences, clauses or phrases may be declared unconstitutional or invalid.

Repealing clause.

Section 10. All acts and parts of acts in conflict herewith are hereby repealed.

Effective immediately.

Section 11. This act shall be in full force and effect from and after its passage and approval.

Approved: March 3, 1967.

CHAPTER 324

An Act to Appropriate Money From the General Fund to the Montana Historical Society to Lease, Operate and Maintain a Building to House the Antique Ford Automobile Collection for the Biennium Ending June 30, 1969.

Be it enacted by the Legislative Assembly of the State of Montana:

Building to house the antique Ford automobile collection.

Section 1. There is appropriated from the general fund to the Montana Historical Society for the purpose of leasing, operating, and maintaining a building to house the antique Ford automobile collection for the biennium ending June 30, 1969, monies as follows:

	For the Fiscal Year Ending *June 30, 1968*	For the Fiscal Year Ending *June 30, 1969*
MONTANA HISTORICAL SOCIETY		
(1) From the general fund	$ 12,500	$ 12,500

Admission fee.

Section 2. An admission fee shall be set by the board of trustees of the Montana Historical Society and paid by patrons of the antique Ford automobile collection. Admission fee proceeds up to the amount of twelve thousand five hundred dollars ($12,500) per fiscal year shall be deposited

in the general fund. Proceeds over such amount each fiscal year shall be deposited in the Montana Historical Society account in the earmarked revenue fund.

Approved: March 3, 1967.

CHAPTER 325

An Act to Provide for Medical Assistance in Conformity with Title XIX of the Federal Social Security Act of 1935 as Amended; Providing for the Administration of the Act by the State Department of Public Welfare and the County Departments of Public Welfare; Providing Eligibility Requirements for Assistance Under the Act; and Providing for Counties' Share of Participation Under the Act; Amending Section 71-211, R.C.M. 1947, to Conform Herewith; and Repealing Sections 71-1501 Through 71-1510, R.C.M. 1947.

Be it enacted by the Legislative Assembly of the State of Montana:

Administration of payment program of medical assistance.

Section 1. **Provisions for administration.** (1) The state department of public welfare (hereinafter called "state department") is hereby authorized and empowered to administer and supervise a vendor payment program of medical assistance, under the powers, duties, and functions provided in Sections 71-201 through 71-232, R.C.M. 1947, as amended and as contemplated by the provisions of Title XIX of the federal social security act.

(2) The county department of public welfare shall be charged with the local administration and supervision of medical assistance, subject to the powers, duties and functions prescribed for the county department in sections 71-201 through 71-232, R.C.M. 1947.

(3) It is hereby mandatory and required that the state plan and operation of medical assistance shall be in effect in each and every county of the state and the administration and supervision of medical assistance shall be uniform throughout the several counties of the state.

(4) The state department of public welfare shall have printed and distribute copies of this act to all county welfare departments and shall prescribe the form of and print and supply to the county welfare departments blanks of

applications, reports and such other forms as may be necessary in relation to medical assistance.

(5) All rules and regulations of the state department of public welfare made under this act shall be binding upon the county departments of public welfare.

(6) The state department shall adopt appropriate rules and regulations, not inconsistent with this act, to administer and supervise the said program uniformly throughout the state and shall define by rules and regulations medical assistance. Medical assistance shall be furnished through payments to providers of services and supplies as contemplated in this act.

Medical assistance to include.

Section 2. The definition of medical assistance shall include:

(a) Inpatient hospital services (other than services in a public institution for tuberculosis or mental diseases);

(b) outpatient hospital services;

(c) Other laboratory and X-ray services;

(d) Skilled nursing home services (other than services in a public institution for tuberculosis or mental diseases);

(e) Physicians' services, whether furnished in the office, the patient's home, a hospital, a skilled nursing home or elsewhere.

It may also include, although not necessarily limited to the following:

(a) Medical care, or any other type of remedial care recognized under state law, furnished by licensed practitioners within the scope of their practice as defined by state law;

(b) Home health care services;

(c) Private duty nursing services;

(d) Dental services;

(e) Physical therapy and other related services;

(f) Clinic services;

(g) Prescribed drugs, dentures, and prosthetic devices; and eyeglasses prescribed by a physician skilled in diseases of the eye or by an optometrist, whichever the individual may select;

(h) Other diagnostic, screening, preventive, rehabilitative, chiropractic and osteopathic services;

(i) Any additional medical service or aid allowable under or provided by the federal social security act.

The foregoing services shall be provided to the fullest extent that moneys appropriated, collected, accumulated or matched from any source by the state department will allow. Priorities of the foregoing items and amounts of medical assistance, if funds are inadequate, shall be determined by the state department. The state department shall establish standards of assistance.

Advisory council —membership.

Section 3. The state department shall advise and consult at least semi-annually with a council composed of not less than nine members, to be appointed by the Governor and to serve three year overlapping terms. The first appointed council shall draw lots to determine which members will serve three years, which two years, and which one year. The following associations, to wit: (1) the Montana Medical Association, (2) The Montana State Dental Association, (3) the Montana Hospital Association, (4) the Montana State Pharmaceutical Association, (5) the Montana Nursing Home Association, (6) the Montana Association of County Commissioners, (7) the Montana Nurses Association, and (8) the Montana Optometry Association shall be requested to recommend not less than one member for appointment to such council in order that there be adequate representation of interested professional and official groups. As vacancies occur, the organization recommending the individual whose position is expiring will be requested to submit a recommendation for filling the position. The ninth member of such additional members as the Governor may elect to appoint as representative of consumer interests. The following shall serve ex officio as members of the council: (a) executive director of the state board of health, (b) the administrator of the state department of public welfare, as chairman. Members shall be reimbursed for travel and actual expenses while in performance of their duties, not to exceed that allowed to non-elective state officials.

Professional freedom.

Section 4. The state department shall provide for professional freedom of those licensed practitioners who provide medical assistance under this act, and provide reasonable freedom of choice to recipients of medical aid to select the vendor or provider of medical care, services or prescribed drugs.

Contracted services.

Section 5. The state department may, by suitable rules and regulations, provide for contracting with any state or private agency for processing and payment of claims under such program of medical assistance, and the state welfare board shall have the authority to contract with one or more private or state agencies to provide any or all of the enumerated medical services.

Eligibility requirements for medical assistance.

Section 6. **Eligibility requirements for medical assistance.** Medical assistance shall be granted in behalf of all persons who reside in the state of Montana, including residents temporarily absent from the state and who meet any of the following requirements:

(1) Who receive all or part of their income from the federally aided public assistance programs: old-age assistance, aid to the blind, aid to dependent children, and aid to the permanently and totally disabled;

(2) All persons, who upon application, would be eligible for financial assistance under any one of the federally aided programs referred to above;

(3) All persons who would be entitled to financial assistance under one of the federally aided categories except that they do not meet the durational residence requirements or relative responsibility requirements of any of the public assistance programs above enumerated;

(4) Persons in medical institutions (except public institutions for tuberculosis or mental illness) who, if they were no longer in such institution, would be eligible for financial assistance under one of the above programs;

(5) All children under twenty-one who meet the conditions of eligibility in the state's plan for aid to dependent children, other than with respect to school attendance;

(6) All children under twenty-one who are in foster care under the supervision of the state department (except children in public institutions).

Amount, scope and duration of assistance.

Section 7. **Amount, scope, and duration of assistance.** The amount, scope, and duration of medical assistance granted eligible persons shall be determined by the state department.

Application for assistance.

Section 8. **Application for assistance.** Application for assistance under this part shall be made to the county office of the county department in the county in which the person is residing. The application shall be presented in the manner on the form prescribed by the state department. All individuals wishing to apply shall have the opportunity to do so.

County share of participation.

Section 9. **County share of participation.** Each county department shall reimburse the state department in the amount of one-half (½) of the approved medical payments paid by the state department in behalf of persons in the county each month, exclusive of the federal share. Such reimbursements shall be credited to the medical assistance account of the state department.

Investigation and determination of eligibility.

Section 10. **Investigation and determination of eligibility.** The county department shall promptly investigate and determine the eligibility of each applicant under this act in accordance with the rules and regulations of the state department. Each applicant shall be informed of his right to a fair hearing and of the confidential nature of the information given. The county department shall determine whether or not the applicant is eligible for assistance under this act, and aid shall be furnished promptly to eligible persons. The county public welfare board shall review the determination of the eligibility or non-eligibility made by the county department. Each applicant shall receive written notice of the decision concerning his application and right of appeal shall be secured to the applicant under the procedures of section 71-223, R.C.M. 1947.

Redetermination of eligibility.

Section 11. **Redetermination of eligilibity.** All medical assistance cases approved under this part shall be reviewed as often as shall be required under the rules and regulations of the state department.

Change of residence of aid recipient.

Section 12. **Change of residence of person receiving medical assistance.** A recipient who moves his residence to another county in this state shall continue to receive assistance under the rules and regulations of the state de-

partment. The county from which he has moved shall be charged by the state department for such county share of his assistance for a period of one (1) year after which time the county to which he has moved shall be charged therefor. The state department will determine the date of transfer. The county from which a recipient moves shall notify the state department and the county to which the recipient moves.

Confidential records.

Section 13. **Confidential records.** All applications, information and records concerning any applicant or recipient of medical assistance under the provisions of this act shall be confidential and shall not be disclosed nor used for any purpose not directly connected with the administration of medical assistance. The violation of this provision is hereby made a misdemeanor and is punishable as such.

Exclusion of lien.

Section 14. **Exclusion of lien.** No applicant hereunder shall be required to execute an agreement for lien on his real property. No lien may be imposed against the property of any individual prior to his death on account of medical assistance paid or to be paid on his behalf (except pursuant to the judgment of a court on account of benefits incorrectly paid on behalf of such individual). There shall be no adjustment or recovery (except, in the case of an individual who was sixty-five (65) years of age or older when he received such assistance, from his estate, and then only after the death of his surviving spouse, if any, and only at a time when he has no surviving child who is under age twenty-one (21) or is blind or permanently and totally disabled) of any medical assistance correctly paid on behalf of such individual. Recoveries shall be prorated to the federal government and the county involved in the proportion to which each contributed to the medical assistance.

Relative's responsibility.

Section 15. **Relative's responsibility.** The provisions of other parts of Title 71, R.C.M. 1947, as amended, notwithstanding, the only relatives that can be held responsible for payment of medical assistance under the program are the husband or wife of the individual, the parents of children under age twenty-one (21), and the parents of blind or disabled persons over age twenty-one (21).

Discrimination prohibited.

Section 16. **Discrimination prohibited.** No discrimination shall be practiced or asserted against any applicant

for or recipient of care and services under this act, on the basis of race, color, or national origin; and the furnishing of care and services under this act to any applicant or recipient thereof shall not be delayed or denied on the basis of race, color, or national origin.

Amending clause.

Section 17. Section 71-211, R.C.M. 1947, is amended to read as follows:

State department to act as agency of federal government—assistance to ward Indians.

"71-211. *State department* **to act as agency of federal government—assistance to ward Indians.** The state department shall act as the agent of the federal government in public welfare matters of mutual concern in conformity with this act and the Federal Social Security Act, and in the administration of any federal funds granted to the state to aid in the purposes and functions of the state department.

The counties shall not be required to reimburse the state department *for* any portion of old-age assistance, medical assistance, aid to needy dependent children or aid to needy blind or aid to the totally disabled paid to ward Indians, further provided that the federal government may reimburse the state of Montana in behalf of counties, providing general relief to ward Indians, a sum in lieu of taxes which the counties would collect if the lands of such ward Indians were not in trust status. A ward Indian is hereby defined as an Indian who is living on an Indian reservation set aside for tribal use, or is a member of a tribe or nation accorded certain rights and privileges by treaty or by federal statutes. If and when the Federal Social Security Act is amended to define a "ward Indian," such definition shall supersede the foregoing definition."

Repealing clause.

Section 18. All acts and parts of acts in conflict herewith are hereby repealed.

Severability clause.

Section 19. **Legislative intent.** It is the intent of the Legislative Assembly that if a part of this act is invalid, all valid parts that are severable from the invalid part remain in effect. If part of this act is invalid in one or more of its applications the part remains in effect in all valid applications that are severable from the invalid applications.

Repealing clause.

Section 20. Sections 71-1501 through 71-1510, R.C.M. 1947, are repealed.

Approved: March 6, 1967.